

MAR 15 1962

THE CLEVELAND MUSEUM OF ART
FORTY-FOURTH ANNUAL EXHIBITION OF WORK BY ARTISTS AND CRAFTSMEN OF THE WESTERN RESERVE
MAY 16 to JUNE 24, 1962

PLEASE
PRINT
PLAINLY

Collaborator if any _____

Artist SUSAN AITKENHEAD OPIE

Address 215 GRAND AVE. AKRON SUMMIT
NO. STREET CITY COUNTY

Shipping Address _____ Tel. 864-8310
(IF SHIPMENT IS REQUIRED)

Please enclose Registration Fee of \$2.00 (Check or Money Order) with Entry Blank.

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Note calendar for delivery and return of objects carefully. It is understood that the
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The submission of entries will be construed as acceptance of all conditions printed
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Susan Aitkenhead Opie
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